

EXHIBIT 86

**UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF RHODE ISLAND**

STATE OF NEW YORK, et al.

Plaintiffs,

v.

ROBERT F. KENNEDY, JR., in his official capacity as
SECRETARY OF THE U.S. DEPARTMENT OF
HEALTH AND HUMAN SERVICES, et al.,

Defendants.

Case No. 1:25-cv-00196

DECLARATION OF KRISTEN GOOD

I, Kristen Good, declare under the penalty of perjury pursuant to 28 U.S.C. § 1746 that the foregoing is true and correct:

1. I am a resident of the State of Colorado. I am over the age of 18 and have personal knowledge of all the facts stated herein, except to those matters stated upon information and belief; as to those matters, I believe them to be true. If called as a witness, I could and would testify competently to the matters set forth below.

2. I am currently employed by the Colorado Department of Public Health and Environment (CDPHE) as the Health Equity Branch Deputy Chief, within the Disease Control and Public Health Response Division...

3. As the Health Equity Branch Deputy Chief, I oversee several programs and initiatives within our branch, one of which is the Occupational Health & Industrial Hygiene Program. I also maintain subject matter expertise in Occupational Health and Safety and serve as the division's primary technical expert in Occupational Health.

4. CDPHE works in conjunction with the National Institute for Occupational Safety and Health (NIOSH) within the Centers for Disease Control (CDC). NIOSH operates a Western States Division that provides support to the states west of the Mississippi, including Alaska and Hawaii.

5. CDPHE traditionally relied on NIOSH and the Western States Division for essential occupational health programs and education, outreach, and research support, particularly in high-risk industries such as oil & gas and wildland firefighting. NIOSH also provides technical guidance and best-practice reports and resources for safety for workers who do cleanup after a wildland fire. They have significantly contributed to firefighter safety through programs like the Wildland Firefighting Safety and Health Program, which identifies and mitigates on-the-job hazards. They've also conducted long-term studies, such as the Wildland Firefighter Exposure and Health Effects Study, to understand the impact of hazards on long-term firefighter health. Their operation of the National Firefighter Registry for Cancer, a crucial program for researching cancer risk among firefighters, has been helpful for CDPHE as it does important work related to establishing the connections between on-the-job exposures and health risks among firefighters, which CDPHE can then use to inform our public health outreach.

6. CDPHE does not have a comprehensive internal occupational health program. That program is limited to two individuals: along with myself, we have one medical epidemiologist with specialized training in occupational health located in the CDPHE's Communicable Disease Branch. These two individuals provide limited occupational health support during incidents. This support often includes triaging public inquiries by redirecting the public to other agencies or resources.

7. As a result of this limited internal occupational health program, CDPHE has long relied on its partnership with the Western States Division to meet statewide needs when CDPHE's program needs additional assistance.

8. Due to recent layoffs within the CDC, however, the Western States Division has been effectively dismantled. As of the date of this declaration, and based on information and belief, only one staff member remains within the Division. This means that only one staff member is available to provide occupational health expertise and support to the entire western half of the United States.

9. This lack of staffing will severely limit crucial expertise and support available to CDPHE. This will impact CDPHE's ability to provide occupational health support during public health incidents. For example, in 2024 we used NIOSH's webpages and resources around avian flu and workers extensively with the H5N1 outbreaks. We followed NIOSH's extensive best practices for protecting poultry and dairy farm workers from avian flu, including their extensive instructions on how to enact engineering controls, administrative controls, and PPE protocols to reduce exposures in the workplace. We also distributed training materials, infographic flyers, and other educational/outreach materials designed by NIOSH, sharing them directly with impacted workers and farm managers. Without these resources, we would not have been able to deploy a rapid, high-quality response to support impacted Coloradan farmworkers, as we lacked the capacity and subject matter expertise to quickly produce this types of guidance and educational/outreach materials ourselves.

10. Moreover, CDPHE anticipated receiving federal funding for fiscal years 2026-2031 through NOISH's State Surveillance Program. The application process for this program

was originally scheduled to open in May 2025. CDPHE anticipated applying for and receiving these federal grant funds.

11. But to my knowledge, the process has not moved forward due to layoffs within NOISH. This lack of funding will limit CDPHE's ability to provide comprehensive occupational health services moving forward.

Executed on July 24, 2025, at Denver, Colorado.

Kristen Good Digitally signed by Kristen Good
Date: 2025.07.24 11:52:47 -06'00'

Kristen Good